

Arizona Department of Health Services

Arizona WIC Program



Vendor Training Overview Federal Fiscal Year 2016

What's Covered in Vendor Training?

- The Purpose of WIC
- Vendor Authorization
- Authorized Foods
- Minimum Stock and Variety Requirements
- Infant Formula Purchase Requirements
- Redemption Procedures

What's Covered in Vendor Training?

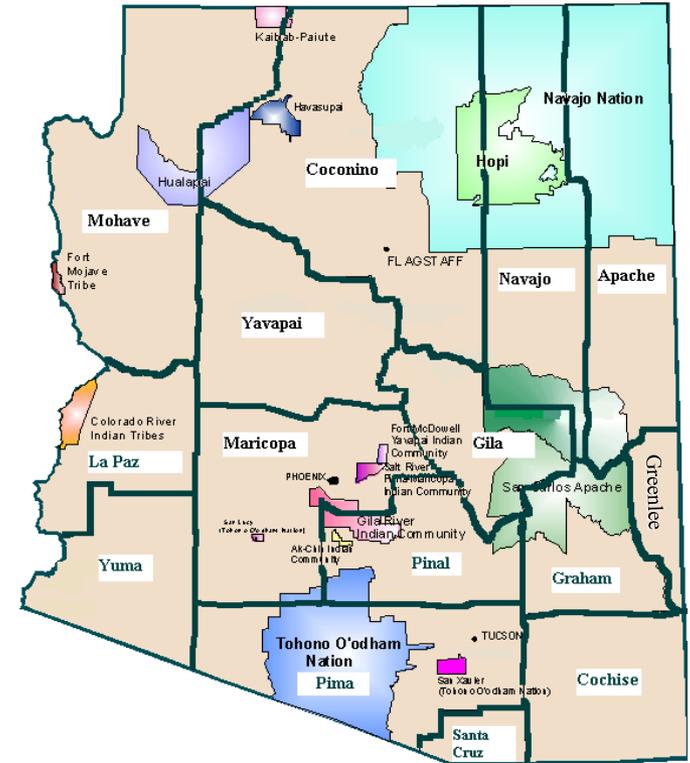
- Sanction System
- Complaint Process
- Claims Procedures
- Incentive Items Policies
- Changes since the last training

The Purpose of WIC

- Covered by a DVD that explains the :
 - WIC Program History
 - Purpose of the Program
 - Participant eligibility requirements
 - Four (4) major Components of WIC
 - Nutrition Education and Goals
 - Breastfeeding Education and Promotion
 - Supplemental Foods
 - Referrals

WIC Programs in Arizona

- Arizona WIC Program
- Inter Tribal Council of Arizona (ITCA) WIC Program
- Navajo Nation WIC Program



WIC Vendor's Role

Like the pharmacist dispensing medicines, the...

- The Vendor is important in the health care community
- WIC food instruments contain a food prescription
- Vendor fills the prescription as prescribed



WIC Vendor's Role



- The Vendor is vital to the success of the WIC Program
- The Vendor is the final step in the process

Federal Regulation Requirements

- Annual Training via Training Alert
 - All current Vendors
- Mandatory Contract Training
 - Vendor's whose contracts expire at the end of the current fiscal year (September 30)
- Preauthorization Training
 - New Vendor Applicants

Vendor Contract Requirements

- Must be a written Vendor contract
- Signed by a person who has legal authority



Vendor Contract

- Explains the rights and responsibilities
- Provides retail outlets for WIC participants
- The contract does not constitute a license or property interest



Vendor Contract - Term

- Three (3) Federal Fiscal Years or a portion thereof
- Three (3) separate contract cycles
 - Two(2) major chain stores (1/3)
 - Major chain/super center type stores (1/3)
 - Independent and small chain stores (1/3)



Vendor Selection Criteria

- Outlined in Section 13 of the Vendor Manual
- All criteria **MUST** be met
- Failure to meet all criteria will result in the denial of the contract.

Vendor Selection Criteria

Federally Mandated Requirements:

- Minimum WIC stock and variety
 - Applicants must meet and maintain minimum stock and variety requirements.

Vendor Selection Criteria

Federally Mandated Requirements:

- Infant Formula Purchases
 - All infant formula **must** be purchased **only** from a supplier that is listed the Arizona WIC Program Infant Formula Suppliers list

Vendor Selection Criteria

Supplier Problems

- Infant Formula Supplier Problems
 - If the Vendor's normal supplier is unable to meet their order request...
 - It is the Vendor's responsibility to select another supplier from the Arizona WIC Program's Infant Formula Suppliers list.

Vendor Selection Criteria

Federally Mandated Requirements

- Competitive prices for WIC foods
 - Must have competitive prices for all WIC food items

Vendor Selection Criteria

Federally Mandated Requirements

- Training Attendance
 - New Owner or Corporate Representative (Owner, Officer or Member) **must** attend mandatory training; and
 - One management representative (or their designee) from each store location must attend mandatory training.

Vendor Selection Criteria

Federally Mandated Requirements

- Supplemental Nutrition Assistance Program (SNAP) compliance
 - Must be in compliance with SNAP
- Business Integrity
 - Owners, officers and managers must maintain a standard of business honesty and maintain a reputation of good business practices

Vendor Selection Criteria

Federally Mandated Requirements

- Service Mark Compliance



WIC ACRONYM AND LOGOS

WIC Acronym and Logo

- Registered service marks that are owned by the United States Department of Agriculture and are subject to penalties.
- Under no circumstances should Vendors include the WIC logo or acronym in whole or in part or any close proximities, as part of their official name, in banners, advertising, signs, etc., nor should the WIC acronym or logo be attached to individual food items.

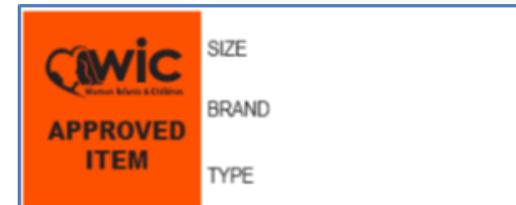
WIC Shelf Markers

- The WIC Program will provide Vendors with shelf markers that can be used to identify WIC approved foods.



WIC Shelf Markers

- Authorized WIC Vendors have three options for the shelf markers:
 - Department Issued
 - Department Approved Printable Markers
 - Department Approved Graphic (to make and produce own shelf markers)
MUST BE APPROVED BEFORE IMPLEMENTED IN STORE



WIC Decal

- Identifies the store as an authorized WIC Vendor
- Must be posted
- Available in English and Spanish



WIC Identifiers

- The WIC decal and the approved shelf markers are the only authorized WIC identifiers that can be used by Vendors.
- The WIC Program will provide these identifiers to the Vendor.



Vendor Selection Criteria

- Current SNAP authorization
 - Must have a valid authorization and be in compliance with SNAP
- Accessibility to WIC Participants
 - Open for business for a minimum of 10 hours a day, six days a week
 - Be in a location near a WIC clinic or near participants' residences

Vendor Selection Criteria

- Business Operations

- Viable Business:

- A business that has been open **for at least one (1) year prior** to the submission of the Vendor application and WIC Price Stock Survey.
 - Applicant must be able to provide the Department with one (1) year of business bank statements and records.

Full Line Grocery Store

- Must carry at a minimum:

Food Category	Varieties and Units Required
Cereal	Five (5) or more varieties of cereal with five (5) or more units of each variety
Bread – Tortillas	Four (4) or more varieties of bread/tortillas with five (5) or more units of each variety
Fresh Dairy Products	Five (5) or more varieties of fresh dairy products with five (5) or more units of each variety
Fresh Fruit	Seven (7) or more varieties of fresh fruit with five (5) or more units of each variety
Fresh Vegetables	Seven (7) or more varieties fresh vegetables with five (5) or more units of each variety
Fresh Meat	Four (4) or more varieties fresh meat with five (5) or more units of each variety

Full Line Grocery Store

- **Variety**
 - An assortment of different types of food items for each category of cereal, bread/tortillas, fresh dairy products, fresh fruit, fresh vegetables, and fresh meats/poultry/fish
 - For example: fresh dairy products may consist of milk, cheese, yogurt, sour cream, cottage cheese, etc., and fresh meats may consist of ground beef, chicken breasts, turkey, pork chops, steaks, etc.

Full Line Grocery Store

- **Unit**
 - A single item in a broader category of food items
 - For example one (1) apple, one (1) container of milk, one (1) loaf of bread, etc.

Vendor Selection Criteria

- Type of Store
 - Must have 45% or more in gross sales from groceries
 - Additional documentation may be requested
- Sanitation Compliance
 - Must have a current Retail Establishment Permit to Operate or Health Permit posted in their store

Vendor Selection Criteria

- Volume of WIC business (Current Vendors)
 - Must have an average of 90 or more food instruments redeemed for the quarter of February, March and April
- History of Compliance
 - No disqualification from SNAP or any WIC Program

Above-50-Percent Vendors

- The Arizona WIC Program will not authorize a new for-profit applicant that is expected to receive more than 50 percent of its annual food sales revenue from WIC food instruments, unless that applicant is necessary to ensure participant access to program benefits.

Above-50-Percent Vendors

- Within six months, an assessment will be completed for all new Vendors to make sure that the status initially assigned is appropriate.
- Upon completion of the assessment, if the Vendor's food sales from WIC food instruments exceed 50 percent of their total food sales, the Vendor contract will be terminated unless the outlet is necessary to ensure participant access.

Above-50-Percent Vendors Annual Assessment

- Annually, an assessment will be completed for all current Vendors to make sure that the status initially assigned is still valid.
- Upon completion, if the Vendor's food sales from WIC food instruments exceed 50 percent of their total food sales, the Vendor's status will be changed to the Above-50-Percent Vendor status.

Incentive Item Prohibition

- Above-50-Percent Vendors or Vendor Applicants who are likely to receive more than 50 percent of their annual food sales from WIC food instruments **shall not** provide incentive items to WIC program participants.
- All regular Vendors are prohibited from offering incentive items **solely** to WIC customers in an effort to encourage participants to redeem their WIC food instruments at their stores.

Incentive Item Prohibition

- Above-50-Percent Vendors cannot provide any incentive items to WIC customers.
- Regular Vendors can provide incentive items to WIC customers, as long as the same incentive items are being provided to all customers.

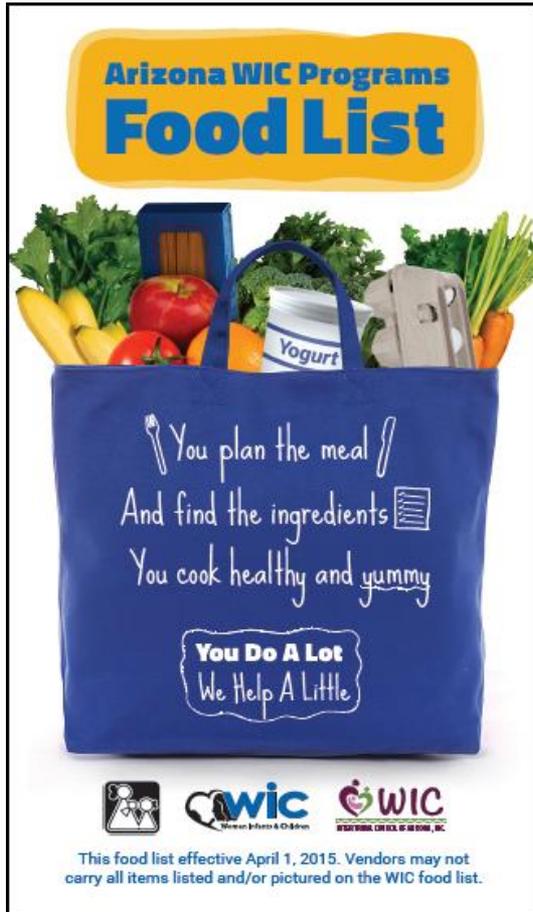
Incentive Item Prohibition

- Incentive items or other free merchandise are defined as: Free or reduced price food or other items, cash, lottery tickets, buy one get one free, buy one get one at a reduced price, free amounts added to an item by a manufacturer, manufacturer coupons, store loyalty cards, sales and specials for WIC food items.

Incentive Item Prohibition

- Free or reduced price services, except for the minimal customary courtesies of the retail food trade, such as bagging WIC foods for the participant and assisting the participant with loading WIC foods into his or her vehicle.

WIC Approved Foods



- Are carefully selected;
- Meet nutritional requirements to provide vitamins, minerals and protein;
- No substitutions for WIC foods are allowed.

Food Item Declarations

- Vendors must declare their store or house brand for the following items:
 - Refrigerated cow's milk (whole, 2% reduced-fat, 1% low-fat, and fat-free)
 - Cheese (Cheddar, Monterey Jack, Colby, Colby-Monterey Jack, and Mozzarella)
 - Eggs (Medium and Large)

Food Item Declarations

- Store Brands are defined as:
 - A product that is manufactured and packaged for a particular store or retail chain.
- House Brands are defined as:
 - A proprietary brand of merchandise sold by one retailer (i.e., IGA, Springfield, Shurfine, Western Family, Hy-Top, Market Pantry, etc.).

Food Item Declarations

- If a Vendor does not have a store or house brand to meet the requirement, the Vendor must:
 - Select a brand that they will declare as the primary brand for WIC purposes.
 - The selected brand may be a national brand and will be the only brand sold to WIC customers.

Food Item Declarations

- If, for reasons beyond the Vendor's control, the declared store or house brand item of milk, cheese or eggs is not available, the Vendor **agrees to** sell any replacement item of milk, cheese or eggs to the WIC customer for the same price as the declared store or house brand.

Food Item Declarations

- Vendors **must** display and maintain the official declaration signage provided by the Department in their milk, cheese and egg cases.

Minimum Stock Requirements

- All authorized WIC Vendors **MUST** meet minimum stock requirements at all times
- Failure to do so may result in the termination of your Vendor contract

Minimum Stock Requirements

Are enough to serve:

- 8 woman/child food packages
- 4 infant packages
 - Similac Advance
- 2 infant packages
 - Gerber Good Start Soy

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
Cereal	<p>ONLY THESE BRANDS:</p> <p>Cold Cereal General Mills Chex: Corn, Rice and Wheat General Mills Cheerios: Plain and Multi-Grain General Mills Kix: Plain General Mills Total: Plain Kellogg's Corn Flakes Kellogg's Special K: Original Kellogg's All-Bran Complete Wheat Flakes Kellogg's Frosted Mini Wheats: Original Kellogg's Rice Krispies Malt-O-Meal Crispy Rice Malt-O-Meal Frosted Mini Spooners Post Great Grains Banana Nut Crunch Post Honey Bunches of Oats: Almond, Honey Roasted and Vanilla Post Grape Nuts (Original) Post Grape-Nuts Flakes Quaker Life: Plain Quaker Oatmeal Squares: Brown Sugar and Cinnamon</p> <p>ONLY THESE STORE BRANDS: Crispy Rice Best Yet, First Street, Great Value Toasted Oats Best Yet, Essential Everyday, First Street, Food Club, Great Value, Hy-Top, Kroger, Market Pantry, Safeway, Kitchens</p> <p>Hot Cereal Cream of Wheat Instant Original Flavor Malt-O-Meal Original Hot Wheat Cereal Quaker Instant Oatmeal Original flavor, (single serving packets only)</p> <p><i>Do not count organic or frosted (except Malt-O-Meal Frosted Mini Spooners and Kellogg's Frosted Mini Wheats: Original), hot cereal with added raisins, fruit or nuts or variety packs.</i></p>	<p>24 -- or -- 24 -- or -- 24</p>	<p>boxes or bags, 14 ounce or larger of cold cereal boxes, 11.8 ounces or larger of hot cereal boxes and bags, appropriate size as listed above of hot <u>and</u> cold cereal combined</p>	<p>4 brands: one must be General Mills Plain Cheerios, one must be General Mills Plain Kix and two other brands</p>
	Eggs	Store or house brand, fresh, raw, white chicken eggs.	16	medium or large - one (1) dozen cartons
Dry Beans / Peas / Lentils	Any eligible brand and type of prepackaged dry beans, peas or lentils	8	16 ounce packages only	1 type Dry Beans --and-- 1 type Peas or Lentils
<p><i>Do not count bulk, organic or immature varieties (i.e., green beans, snap beans, yellow beans or wax beans), fresh, frozen, flavored, refined beans, seasoned, bean soup mixes with flavoring packets and spices or gourmet beans.</i></p>				

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
Canned Beans	Any eligible brand and variety of canned beans, plain, regular or low sodium Such as: Black Black-eyed peas Cannellini Garbanzo (Chickpeas) Great Northern Kidney (Red or White) Lima Navy Pink Pinto Red	8	up to 16 ounce cans	not applicable
Do not count organic or beans with added fat, oil, spices or meat (i.e., pork and beans), refried beans, canned green peas, green beans, wax beans, peas or lentils, fruits or vegetables or seasoned beans such as Cajun style, chili beans, BBQ beans, ranch-style, or baked beans.				
Peanut Butter	Any eligible brand of plain (creamy, chunky, super chunk or natural) peanut butter. Low sugar and low sodium are allowed.	8	16 to 18 ounce jars	not applicable
Do not count 'grind your own', organic or spreads, peanut butter with added ingredients (i.e., jams, jelly, marshmallow, chocolate, DHA, omega-3, or honey), or in tubes.				
Bread	ONLY THESE BRANDS OF 100% WHOLE WHEAT LOAVES OF BREAD: Bimbo 100% Whole Wheat Nature's Own 100% Whole Wheat Croweats 100% Whole Wheat Ozark Hearth 100% Whole Wheat Roman Meal Sun Grain 100% Whole Wheat Sara Lee 100% Whole Wheat Wonder 100% Whole Wheat Any eligible store or house brand labeled 100% Whole Wheat (including bakery) Note: Packaging must be labeled with 100% whole wheat and meet the FDA Standard of Identity for whole wheat bread (21 CFR 136.180). [This standard allows for negligible amounts of non-wheat flours.]	6	16 ounce packages only	not applicable
Do not count organic or gluten-free, diet, light, or low carb, buns, rolls, mini-loaves, pita or flatbread, English muffins, sandwich thins and rounds, or bagels.				

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
WHOLE GRAINS				
Soft Corn Tortillas	ONLY THESE BRANDS OF YELLOW OR WHITE SOFT CORN TORTILLAS*: Carlita Casa Rica Don Pancho Guerrero La Bandierita La Buntita Mama Lola's Mission Santa Fe Tortilla Company *Corn (masa) flour, ground corn, or whole corn flour must be listed as the first ingredient.	6	16 ounce packages only	not applicable
		-- or --		
Soft Whole Wheat Flour Tortillas	ONLY THESE BRANDS OF WHOLE WHEAT FLOUR TORTILLAS*: Carlita Guerrero Tortillas de Harina Integral IGA La Bandierita Fajita Mission Sunrise Bakery *Whole wheat flour must be listed as the <u>only</u> flour in the ingredient list.	6		
		-- or --		
Do <u>not</u> count organic or tortilla chips, tostada or tao shells, or white flour tortillas, or flavored tortillas (such as spinach or tomato).				
Brown Rice	ONLY THESE BRANDS OF LONG OR SHORT GRAIN BROWN RICE: Blue Ribbon Mahatma Shurline Springfield Any store or house brand	6		
		-- or --		
Do <u>not</u> count organic or white rice, basmati, jasmine, or instant brown rice, seasoned or flavored or rice in plastic containers.				
Whole Wheat Pasta	Only these brands of whole wheat pasta, any variety: DeLallo Hodgson Mill	6		
		-- or -- any combination that equals 6 packages		
Do not include pasta with added sugar, fat, oil, or salt. Pasta that lists any other flours besides whole wheat and/or whole durum wheat flour in the ingredients.				

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
Milk	Store or house brand of pasteurized refrigerated cow's milk.	28	gallon containers	2 types: one must be 1% and one must be whole
Do not count pint, quart or half gallon containers, organic or chocolate or any flavored milk, raw, buttermilk, acidophilus, half and half, rice or filled milk (i.e., sweetened condensed milk), creamers, or non-dairy products.				
Yogurt	Only these brands of Yogurt, any flavor Brown Cow Dannon LALA Mountain High Yoplait Only the following Store Brands Essential Everyday Kroger Food Club Market Pantry Great Value Lucerne	8	32 ounce (quart size) containers	
Do not count organic, Greek or drinkable, yogurt with mix-ins such as granola, candy pieces, honey, nuts, and similar ingredients.				
Soy milk	Pacific Ultra Soy, shelf stable, original and vanilla only.	*see note	32 ounce container	not applicable
	8 th Continent, refrigerated, original and vanilla only.		1/2 gallon containers	
	Silk, refrigerated, original only		1/3 gallon containers	
Do not count pint or gallon containers, organic or light, low fat, chocolate, or soy milk with DHA/ARA, or 8 th Continent Complete Vanilla.				
Goat's Milk	Meyenberg, refrigerated, whole or low fat	*see note	quart containers only	not applicable
Do not count evaporated, powdered, or canned.				
Tofu	Only these brands of water-packed, any texture (i.e., soft, medium, firm or extra firm), calcium set tofu with NO added fat, sugar, oil or salt (sodium). Azumaya House Foods	*see note	16 ounce packages only	not applicable
Do not count organic.				

* Note: The Department has not set a minimum stock requirement at this time. However, if a WIC participant makes a request for this item, the Vendor must order the item and make it available within five (5) calendar days.

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Revision Date: October 1, 2015

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
Cheese	<p>Store or house brand, plain, pasteurized cheese in 16 ounce packages only</p> <p>ONLY THESE TYPES:</p> <p>Cheddar (includes, mild, medium, sharp, extra sharp, longhorn or white) Colby Monterey Jack Mozzarella (includes string cheese) Blended cheese (blend of any type listed above)</p>	8	pounds	3 types: one must be Cheddar, one must be Monterey Jack, and one other type
<p><u>Do not</u> count deli counter or random weight cheese, organic or imported cheese, with added flavors or ingredients (i.e., peppers, pimientos, wine, etc.), cream cheese, cheese that is diced, grated, shredded, or sliced, cheese sticks (except mozzarella string cheese) or swirls, processed American cheese, processed cheese food, cheese product, or cheese spread.</p>				
Juice	<p>Only these brands, 100% juice, fortified with 120% Vitamin C, with NO sugar or sweeteners added:</p> <p><u>64 ounce shelf stable:</u></p> <p>Any brand Orange and Grapefruit Campbells Tomato Seneca Apple Shurfine Apple and Grape Treetop Apple Langer's Apple, Grape, White Grape and Pineapple Welch's Grape and White Grape Western Family Apple and Grape</p> <p><u>64 ounce refrigerated:</u></p> <p>Any brand Orange</p> <p><u>11.5 – 12 ounce frozen:</u></p> <p>Any brand Orange and Grapefruit Dole Pineapple and Pineapple Orange Langer's Apple Old Drotard Apple, Grape and Pineapple Seneca Apple Shurfine Apple Treetop Apple Welch's Grape and White Grape Western Family Apple and Grape</p>	16	64 ounce single strength or 11.5/12 ounce frozen containers	3 types: one must be 64 ounce Tree Top Apple (does not include individual bottles from a 3-pack) shelf stable Juice, one must be any brand 11.5 or 12 ounce frozen Orange Juice and one other type
<p><u>Do not</u> count organic or fresh, and non-frozen concentrate, TreeTop apple juice from 3-pack, Naked and Odwalla brands, juice in glass bottles, 8-ounce frozen containers or juices with other added ingredients (including but not limited to grape seed extract, ginseng, guarana, taurine, caffeine, carnitine, chromium, St. John's Wort, wheatgrass, Ginkgo Biloba or others).</p>				

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
CANNED FISH				
Tuna	Any eligible brand, plain, chunk light, water packed tuna, regular or low sodium	6	5 ounce cans	not applicable
		–or–		
Do not count oil packed, solid white, albacore, prime fillet, flavored or seasoned, pouches or lunch kits, or with added ingredients or soy protein.				
Pink Salmon	Any eligible brand, plain water-packed, pink salmon, regular or low sodium	6	5 ounce cans	
		–or–		
Do not count oil packed, filets, red (includes Red Sockeye), Atlantic salmon, flavored, seasoned, in pouches, lunch kits or with added ingredients.				
Sardines	Any eligible brand, flavored, seasoned or plain sardines.	8	3.75 ounce cans	
Do not count Brisling or Norwegian sardines.				
Fresh Fruits and Vegetables	Any variety of fresh (includes organic), whole or out-up, fruits and vegetables. Single pieces, bagged or prepackaged fruits and vegetables (including lettuce) are allowed.	16	Pounds of fruit –and– Pounds of Vegetables	5 types of fruits –and– 5 types of vegetables
		16		
Do not count vegetables with added sugar, fat, oil or salt, canned or frozen, creamed, sauced, breaded, dried, herbs or spices, edible blossoms of flowers (i.e., squash blossoms), fruits and vegetables served at a salad bar, salad kits, or with dipping sauces, ornamental fruits and vegetables (i.e., chilies on a string or painted pumpkins), fruit baskets, party trays or nuts (including peanuts) items such as blueberry muffins.				
Canned Vegetables	Any brand Any variety, including organic, regular or low sodium, single or mixed varieties without added sugar or syrup, tomato paste, tomato sauce, puree, whole, crushed, stewed, or sliced tomatoes are allowed.	4 cans	Any size and type of container, including cans, cups or jars	2 types
Do not count vegetables with added fat, *sugar, or oil, added pastas or rice, pickled or creamed, vegetables in sauce, pizza sauce, soups, ketchup, relish, olives.				
*Note: Small amounts of sugar are added to some foods that are naturally sugar-containing during the canning process to prevent stress resulting in membrane rupture. This small amount of added sugar is minimal and helps to maintain the quality and structure of the food and is allowed for canned peas and corn only.				
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Revision Date: October 1, 2015				

Minimum Stock Requirements

**ARIZONA WIC PROGRAM'S
MINIMUM STOCK REQUIREMENTS**
(These stock requirements must be maintained at all times.)

WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
Canned Fruits	Any brand Any variety, including organic, shelf stable or refrigerated single or mixed variety packaged in juice or water, and natural or unsweetened applesauce is allowed.	4 cans	Any size and type of container, including cans, cups or jars	2 types
<u>Do not</u> count fruit packed in syrup (heavy, light or extra light), fruit with added sugar, fat, oil, or salt, fruit packed in sweetened fruit juice or nectar, cranberry sauce, pie filling, fruit with artificial sweeteners, such as Splenda or NutraSweet, or with any other added ingredient.				
Frozen Vegetables	Any brand Any varieties, including organic single or mixed variety, steamer bags are allowed.	4 packages	Any size and type of container	2 types
<u>Do not</u> count breaded or seasoned vegetables, French fries, tater tots, hash browns, or vegetables with added sugar, syrup, oil, fat, pasta, rice, or any other ingredients, and vegetables with sauce, such as cheese, butter, or teriyaki sauce.				
Frozen Fruits	Any brand Any variety, including organic, single or mixed variety is allowed.	4 packages	Any size and type of container	2 types
<u>Do not</u> count fruit with any other added ingredients, fruits with added sugar, fat, oil or salt, smoothies, or fruit with artificial sweeteners, such as Splenda or NutraSweet.				

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Revision Date: October 1, 2015

Minimum Stock Requirements

ARIZONA WIC PROGRAM'S MINIMUM STOCK REQUIREMENTS (These stock requirements <u>must</u> be maintained at all times.)				
WIC FOOD	BRAND/TYPE	AMOUNT	SIZE	# OF VARIETIES
Infant Formula	Similac Advance with Iron (with EarlyShield and/or OptiGRO) Powder	36	12.4 ounce cans	not applicable.
	Gerber Good Start Soy Powder	18	12.9 ounce cans	not applicable.
Infant cereal	Beech-Nut or Gerber, single grain, plain without fruit.	18	8 ounce boxes	not applicable.
	<u>Only these varieties:</u> Barley Oatmeal Rice Whole Wheat	-- or -- 9	16 ounce boxes any combination of 8 and 16 ounce boxes that equals 144 ounces	
<i>Do not</i> count organic or high protein, mixed or multi-grain cereal, cereals with fruit, sugar, yogurt or formula or DHA/ARA added, single serving, cups, jars or cans.				
Infant jarred foods - fruits and vegetables	Beech-Nut, Gerber or Tippy Toes, stage 2, single or mixed variety of fruits and/or vegetables (i. e., apples and bananas, carrots and mangos), multipacks and variety packs.	64	4 ounce jars	2 types of fruits --and-- 2 types of vegetables
<i>Do not</i> count organic, packed in pouches or fruits and vegetables with added sugar, salt, starches, formula, cereal or DHA/ARA, desserts, dinners, smoothies, and food combinations.				
Infant jarred foods - meats	Beech-Nut, Gerber or Tippy Toes, any stage, infant meats, single ingredient (added broth and/or gravy allowed).	31	2.5 ounce containers	not applicable.
<i>Do not</i> count organic or meat with added salt or sugar, meat sticks, dinners, and food combinations.				

Infant Formula

- When redeeming infant formula food instruments, remember to:
 - Read the prescription carefully
 - Ensure that the items being purchased are specified on the food instrument (sizes, type, and amount)
 - Ensure that all formula listed on the food instrument is purchased

Infant Formula Issue

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 6 PM, Call 1-800-2528-WIC		MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # 68063817	75-1248 919 PAYABLE THROUGH BOULDER, CO Children Alliance Bank, Forward Lbrs & More Clear City, NN 16232 AOCIF 862370
AGENCY CLINIC PARTICIPANT ID 	PARTICIPANT NAME 	DRAFT TYPE 003533AZ		FIRST DATE TO USE 03/28/2014	DATE OF USE 4-16-14
10 CONTAINER 32 OUNCE (1 QUART) READY-TO-USE SIMILAC NEOSURE AND/OR SIMILAC EXPERT CARE NEOSURE				ACTUAL \$ AMOUNT \$ UNAPPORTIONED CASHED/VOID \$179.80	LAST DATE TO USE 04/26/2014
				PAY TO THE ORDER OF:	
PARTICIPANTS DO NOT SIGN UNTIL TIME OF PURCHASE					
SIGNATURE AT STORE:					
CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER					

Similar NeoSure/Similar Expert Care NeoSure	Cost/Unit
32 ounce (1 quart) Ready To Use	\$ 8.28
13.1 ounce Powder	\$17.98

Infant Formula - CONCERN

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 6 PM, Call 1-800-252-8400		MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # 68063817	75-1248 919 PAYABLE THROUGH BOULDER, CO Citizens Alliance Bank, Forward Ltr & Acct Clearing, IN 16232 ACCT# 862370
AGENCY CLINIC PARTICIPANT ID 	PARTICIPANT NAME 	DRAFT TYPE 003533AZ	10 CONTAINER 32 OUNCE (1 QUART) READY-TO-USE SIMILAC NEOSURE AND/OR SIMILAC EXPERT CARE NEOSURE		
VENDOR MUST DEPOSIT WITHIN 60 CALENDAR DAYS FROM FIRST DATE TO USE.			FIRST DATE TO USE 03/28/2014	DATE OF USE 4-16-14	
ACTUAL \$ AMOUNT \$ US (CHECK ONLY) CASH (NON-ATM)			LAST DATE TO USE 04/26/2014	PAY TO THE ORDER OF:	
\$179.80 <small>TAX EXEMPT SALE NOT TO EXCEED \$500.00</small>			PARTICIPANTS DO NOT SIGN UNTIL TIME OF PURCHASE		
SIGNATURE AT STORE:					
<small>CHECKER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.</small>					

FI Rejected for – Over the Maximum - ACH Payment was applied

Actual Cost was: \$82.80 (\$8.28 x 10)

Vendor was paid: \$89.00

Overpayment of: \$ 6.20

Infant Formula - CONCERN

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-858-8400		MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # 68063817	75-1248 PAYABLE THROUGH SOLUTIFIN, CHASE Alliance Bank, Powerd Labs Branch Clearing City, MN 55422 A/C # 802270
AGENT: [] TO ADDITIONAL P. [] []		DRAFT TYPE 003533AZ		FIRST DATE TO USE 03/28/2014	DATE OF USE 4-16-14
10 CONTAINER 32 OUNCE (1 QUART) READY-TO-USE SIMILAC NEOSURE AND/OR SIMILAC EXPERT CARE NEOSURE				ACTUAL \$ AMOUNT \$ CORRECTION ONLY CASH ON HAND \$179.80	LAST DATE TO USE 04/26/2014
				PAY TO THE ORDER OF:	
				TAX EXEMPT SALE NOT REVERSED \$504.00 NOT PAYABLE WITHOUT VERIFIED STAMP	
PARTICIPANT DO NOT SIGN UNTIL TIME OF PURCHASE					
SIGNATURE: _____ CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.					

1. Child's health was put at risk
2. WIC participant received extra formula
3. Vendor was overpaid for this FI
4. Vendor was charged a bank fee
5. WIC was charged a bank fee

WIC Food Instruments

- Food Prescription
- Vendor fills the prescription as written on the food instrument
- Deposit into Vendor's authorized bank account
- Automated food instruments
 - Computer-generated

Description of Food Instruments

- Participant Name and ID
- Serial Number

The image shows a WIC Draft form with several fields highlighted in red. The highlighted fields are: 'PARTICIPANT ID', 'PARTICIPANT NAME', 'DRAFT #', and a large area containing a repeating pattern of 'YI' characters, which is the prescription box. The form also includes fields for 'AGENCY', 'CLINIC', 'DRAFT TYPE', 'AZ WIC USE ONLY', 'FIRST DATE TO USE', 'DATE OF USE', 'ACTUAL \$ AMOUNT', 'LAST DATE TO USE', 'PAY TO THE ORDER OF:', 'SIGNATURE AT STORE', and 'CARRIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.' The form is titled 'ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM' and 'MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED'.

- Prescription Box

Description of Food Instruments

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM <small>1745 WEST ADAMS, PHOENIX, ARIZONA #000 NEED HELP? Mon - Fri 9 AM - 3 PM, Call 1-800-352-5000</small>			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT #	
AGENCY	CLINC	PARTICIPANT ID	PARTICIPANT NAME		DRAFT TYPE	
AZ WIC USE ONLY						
					FIRST DATE TO USE	
					DATE OF USE	
					LAST DATE TO USE	
ACTUAL \$ AMOUNT						
<small>\$ CORRECTION ONLY</small>			<small>\$ CORRECT ORIGINAL</small>			
\$					PAY TO THE ORDER OF:	
<small>TAX EXEMPT SALE NOT TO EXCEED \$20.00 NOT PAYABLE WITHOUT VENDOR ID STAMP</small>						
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE						
SIGNATURE AT STORE						
<small>CASHIER: DO NOT ACCEPT IF ALREADY ISSUED. MUST MATCH SIGNATURE ON ID FOLDER.</small>						

First Date to Use
 Date of Use
 Last Date to Use

Description of Food Instruments

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1745 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon - Fri: 8 AM - 5 PM, CNL 1-800-3525-WIC				MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT #	
AGENCY	CLINC	PARTICIPANT ID	PARTICIPANT NAME	DRAFT TYPE		AZ WIC USE ONLY	
(The main body of the form contains a repeating pattern of the WIC logo.)						FIRST DATE TO USE	
						DATE OF USE	
						LAST DATE TO USE	
						PAY TO THE ORDER OF:	
ACTUAL \$ AMOUNT \$ CORRECTION ONLY CIRCULAR SIGNATURE \$ TAX EXEMPT SALE, NOT TO EXCEED \$200.00						NOT PAYABLE WITHOUT VENDOR ID STAMP	
						PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE SIGNATURE AT STORE	
CARRIER: DO NOT ACCEPT IF ALREADY ISSUED. MUST MATCH SIGNATURE ON B3 FOLDER.							



Dollar Amount Box

Dollar Correction box

Description of Food Instruments

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1745 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-332-5WIC				MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT #					
AGENCY	CLINC	PARTICIPANT ID	PARTICIPANT NAME	DRAFT TYPE							
(The main body of the form contains a repeating pattern of the WIC logo.)								AZ WIC USE ONLY		FIRST DATE TO USE	
										DATE OF USE	
								ACTUAL \$ AMOUNT		LAST DATE TO USE	
								\$ (FOR CASH ONLY)	(CASH/DEBIT)		
		PAY TO THE ORDER OF:									
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE SIGNATURE AT STORE _____											
CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.											

- Signature at Store
- Pay to the Order of

Cash Value Food Instruments

 ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # 65626375		PAYABLE THROUGH SOLUTRAN, Citizen Alliance Bank, Howard Lake Branch Clara City, MN 56222 ACCT# 802070	
AGENCY 02	CLINIC 01	PARTICIPANT ID 1020248854	PARTICIPANT NAME CVV TEST, BOY C2	DRAFT TYPE 003881AZ		75-1248 919		FIRST DATE TO USE 04/26/2014
REDEEMABLE AT APPROVED WIC STORES OR AUTHORIZED FARMERS' MARKETS UP TO \$8.00 ANY COMBINATION FRUITS/VEGETABLES (FRESH, FROZEN AND/OR CANNED) WIC CUSTOMER MAY PAY AMOUNT OVER \$8.00						VENDOR MUST DEPOSIT WITHIN 60 CALENDAR DAYS FROM FIRST DATE TO USE.		DATE OF USE
						ACTUAL \$ AMOUNT \$ CORRECTION ONLY CASHIER INITIAL		LAST DATE TO USE 05/25/2014
						\$ VOID <small>TAX EXEMPT SALE NOT TO EXCEED \$200.00</small>		PAY TO THE ORDER OF: VOID <small>NOT PAYABLE WITHOUT VENDOR ID STAMP</small>
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE								
SIGNATURE AT STORE:						VOID		
<small>CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.</small>								

- Used to purchase fruits and/or vegetables (fresh, frozen and/or canned)

Cash Value Food Instruments

 ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED			DRAFT # 65626375		75-1248 919		PAYABLE THROUGH SOLITRAN, Citizen Alliance Bank, Howard Lake Branch Clara City, MN 56222 ACCT# 802070	
AGENCY	CLINIC	PARTICIPANT ID	PARTICIPANT NAME		DRAFT TYPE		FIRST DATE TO USE		DATE OF USE		
02	01	1020248854	CVV TEST, BOY C2		003881AZ		04/26/2014				
REDEEMABLE AT APPROVED WIC STORES OR AUTHORIZED FARMERS' MARKETS											
UP TO \$8.00 ANY COMBINATION FRUITS/VEGETABLES (FRESH, FROZEN AND/OR CANNED)											
WIC CUSTOMER MAY PAY AMOUNT OVER \$8.00											
ACTUAL \$ AMOUNT						LAST DATE TO USE		05/25/2014			
\$ CORRECTION ONLY						CASHIER INITIAL		PAY TO THE ORDER OF:			
VOID						VOID		VOID			
<small>TAX EXEMPT SALE NOT TO EXCEED \$200.00</small>						<small>NOT PAYABLE WITHOUT VENDOR ID STAMP</small>		PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE			
SIGNATURE AT STORE:						VOID		<small>MP</small>			
<small>CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.</small>											

- Redeemable at authorized WIC Vendors or authorized Farmers' Markets.
- Maximum dollar amount printed in the description box.

WIC Identification

- Issued to all participants and is used:
 - For identification at the clinic and grocery store
 - To finalize the transaction in the store

WIC Identification

How to Use WIC Checks

- Shop only at WIC-approved stores.
- Use food checks only from the "first date to use" through the "last date to use" shown on the food checks.
- Buy only the foods and amounts on the food check.
- Show your WIC ID Card and the food check to the cashier before your items are rung up.
- Remember to sign in the White area of the check at the store.
- Make sure the total dollar amount on the check matches the receipt.
- Be courteous to the cashier.

Como Usar los Cheques de WIC

- Compre solo en las tiendas autorizadas por WIC.
- Use los cheques de alimentos sólo desde la "primera fecha para usar" hasta la "última fecha para usar" que aparecen en los cheques de alimentos.
- Compre solo los alimentos y cantidades que indica el cheque de alimentos.
- Muestre su Tarjeta de Identificación y el cheque de alimentos de WIC al cajero, antes de que marque los artículos.
- Recuerde firmar en el área blanca del cheque en la tienda.
- Asegúrese que la cantidad total en dólares del cheque coincide con la del recibo.
- Sea cortés con el cajero.



Signature of Authorized Representative
Firma del Representante Autorizado

1. _____
2. _____

If this ID Folder is found, return to the nearest WIC clinic or mail to the Arizona Department of Health Services, 150 North 18th Avenue, Suite 310, Phoenix, AZ 85007.
Si encuentra esta Carpeta de Identificación, por favor devuélvala a la clínica de WIC más cercana o envíela por correo a: Arizona Department of Health Services, 150 North 18th Avenue, Suite 310, Phoenix, AZ 85007.

WIC wants to hear from you! What should you report? If you witness or have knowledge of any of the following: poor customer service, criminal activity such as fraud, waste of funds, discriminatory, employee misconduct, or conflict of interest. To report WIC Fraud and abuse call the Fraud Hotline at 866-229-6551 or visit www.azwic.org.
(Comuníquese con WIC ¿Qué debe reportar? Si es testigo o sabe de alguno de estos casos: mal servicio al cliente, actividades delictivas como fraude, mal uso de fondos, discriminación, mala conducta de un empleado o conflicto de intereses. Para reportar fraude y abuso en WIC, llame a la Línea Directa de Fraude al: 866-229-6551 o visite: www.azwic.org.)

1-800-2525-WIC

www.azwic.gov

You Do A Lot
We Help A Little

Usted hace Mucho
Nosotros ayudamos un poco



Lista de Alimentos de los Programas WIC de Arizona



Effective April 2015
En vigencia desde abril de 2015

Authorized Representative Signatures

WIC Identification

- May have one or two signatures
- Initials are not acceptable signatures
- One of the signatures must match the signature on the food instrument

Note: Cashiers do not need to verify names or participant ID numbers

Second Authorized Representative

- When the second Authorized Representative cannot be at the certification, the second signature line on the ID Folder will be voided.

How to Use WIC Checks

- Shop only at WIC-approved stores.
- Use food checks only from the "first date to use" through the "last date to use" shown on the food checks.
- Buy only the foods and amounts listed on the food check.
- Show your WIC ID Folder or Arizona state-issued ID to the cashier before your items are rung up.
- Remember to sign in the white area of the check at the store.
- Make sure the total dollar amount on the check matches the receipt.
- Be courteous to the cashier.

Como Usar los Cheques de WIC

- Compre sólo en las tiendas autorizadas por WIC.
- Use los cheques de alimentos sólo desde la "primera fecha para usar" hasta la "última fecha para usar" que aparecen en los cheques de alimentos.
- Compre sólo los alimentos y cantidades que indica el cheque de alimentos.
- Muestre su Tarjeta de Identificación o Identificación expedida por el Estado de Arizona, así como su cheque de WIC al cajero, antes de que marque los artículos.
- Recuérdese firmar en el área blanca del cheque en la tienda.
- Asegúrese que la cantidad total en dólares del cheque coincide con la del recibo.
- Sea cortés con el cajero.

 **Signature of Authorized Representative**
Firma del Representante Autorizado

1. Judith Bailey

2. **VOID**

If this ID Folder is found, return to the nearest WIC clinic or mail to the Arizona Department of Health Services, 150 North 18th Avenue, Suite 310, Phoenix, AZ 85007.

Si encuentra esta Carpeta de Identificación, por favor devuélvala a la oficina de WIC más cercana o envíela por correo a: Arizona Department of Health Services, 150 North 18th Avenue, Suite 310, Phoenix, AZ 85007.

WIC wants to hear from you! What should you report? If you witness or have knowledge of any of the following: poor customer service, criminal activity such as fraud, waste of funds, discrimination, employee misconduct, or conflict of interest. To report WIC fraud and abuse, call the Fraud Hotline at 1-866-229-8561 or visit www.azwic.gov.

¿Comunicación con WIC ¿Que debe reportar? Si es testigo o sabe de alguno de estos casos: mal servicio al cliente, actividades ilegales como fraude, mal uso de fondos, discriminación, mala conducta de un empleado o conflicto de intereses. Para reportar fraude y abuso en WIC, llame a la Línea Directa de Fraude al 1-866-229-8561 o visite www.azwic.gov.

1-800-2526-WIC www.azwic.gov

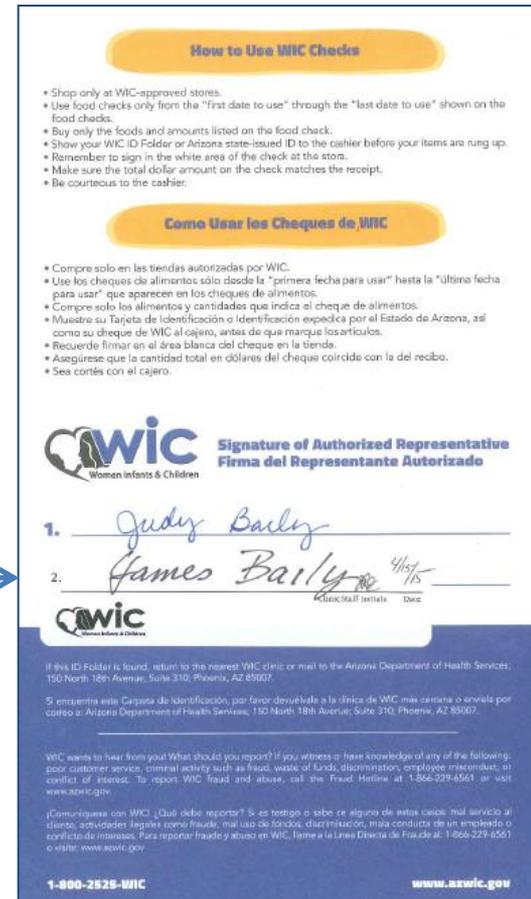
Second Authorized Representative

- At a later date, the second Authorized Representative can come to the WIC office to sign the ID Folder.



Second Authorized Representative

- Official WIC sticker will cover the voided second signature line
- Sticker will have:
 - The second Authorized Representative’s signature
 - The clinic staff’s initials
 - The date the second signature was added



Proxy Certification

- Must have permission from the Authorized Representative
- Local WIC office will provide the person with a Proxy Certification Form

Proxy Certification

PROXY CERTIFICATION ARIZONA WIC PROGRAM	CERTIFICADO DE AUTORIDAD PROGRAMA WIC DE ARIZONA
<p>I, _____ understand that I will be allowed to accept WIC drafts and buy WIC authorized foods for:</p> <p>Participant's Name _____ Participant's Name _____</p> <p>Participant's Name _____ Participant's Name _____</p> <p>Participant's Name _____ Participant's Name _____</p> <p>I also understand that I must follow all WIC rules including:</p> <ul style="list-style-type: none"> • Shop only at WIC authorized stores • Buy only the foods listed on the draft • Give all foods bought to the participant • Save the receipts for the foods bought and give them to the participant • Use the drafts only during the dates in which they are valid. <p>Finally, I understand that misuse of drafts is against the law and that offenders will be will be prosecuted.</p> <p>The undersigned person is authorized to accept and use WIC drafts</p> <p>FROM _____ TO _____</p> <p>Proxy signature _____ Date _____</p> <p>Signature of clinic staff _____ Date _____</p> <p>Printed name and title of clinic staff _____</p>	<p>Yo, _____ entiendo que me sera permitido aceptar los cheques de WIC y comprar los alimentos autorizados por WIC para:</p> <p>Nombre de participante _____ Nombre de participante _____</p> <p>Nombre de participante _____ Nombre de participante _____</p> <p>Nombre de participante _____ Nombre de participante _____</p> <p>Ademas entiendo que debo seguir las reglas de WIC incluyendo:</p> <ul style="list-style-type: none"> • Comprar solo en las tiendas autorizadas por WIC • Comprar solo los alimentos apuntados en el cheque • Dar todos los alimentos al participante • Obtener los recibos de la tienda de los alimentos comprados y entregalosal participante • Usar los cheques solamente durante el tiempo en que son validos <p>Finalmente, comprendo que el mal uso de los cheques es contra la ley y los ofensores seran sujeto a la prosecucion</p> <p>La persona firmante es autorizada para aceptar y usar los cheques de WIC</p> <p>DESDE _____ HASTA _____</p> <p>Firma de autorizado(a) _____ Fecha _____</p> <p>Firma de personal de la clinica _____ Fecha _____</p> <p>Escriba con letra de molde el titulo del personal de la clinica _____</p>

Proxy Certification

- The Proxy will be able to:
 - Do the shopping
 - OR
 - Give the food instruments back to the participant

NOTE: The ID Folder and Proxy Certification Form may not be used at the same time

Arizona State-Issued Driver's License or Identification (ID) Card

- Can be used if the WIC customer does not have their ID Folder or Proxy Form with them.
- The Driver's License/ID card must be issued from the State of Arizona and have a signature.

Arizona State Issued Driver's License or Identification (ID) Card

- The State-Issued Driver's License or ID card is **NOT** required to redeem WIC food instruments.
- Vendors cannot require WIC customers with a valid WIC ID Folder or Proxy Form to produce additional ID or other documentation.

WIC Identification

- **MUST** be presented to the cashier at the time of the WIC transaction
- The signature on the food instrument must match one of the signatures on the ID Folder, Proxy Form or Arizona State-Issued Driver's License/ID Card
- No additional identification is necessary

Redeeming WIC Food Instruments

- Vendor's Responsibility

- To know which WIC food instruments they are authorized to accept
- Give WIC customers the same courtesies as non-WIC customers
- To treat **ALL** customers the same
- Allow the WIC customer to use any checkout lane (except for cash only or self checkout lanes)



Redeeming WIC Food Instruments



- Keep WIC purchases separate
- Cashiers may assist with separating the items

Redeeming WIC Food Instruments



- Cashiers must be familiar with the...
 - Food instrument redemption procedures
 - Arizona WIC Programs Food List

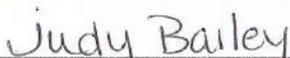
Types of Coupons Allowed*

- Cents off – double, triple, quadruple
- Buy one, get one free – first item purchased is a WIC item, free item can be any item
- Manufacturers' promotions – free additional ounces – free ounces do not count against maximums on food instrument
- Store discount cards – can be used on any item

* Excludes Above-50-Percent Vendors

Redemption Procedures

- If signatures do not match
 - WIC customer can re-sign their food instrument

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # _____	
AGENCY 07	CLINIC 01	PARTICIPANT ID 1070866922	PARTICIPANT NAME BAILEY, MARY		DRAFT TYPE 003440AZ	
9 "2 PACK" (3.5 OZ EACH) WIC APPROVED INFANT FRUITS AND VEGETABLES OR 16 CONTAINER (4 OZ EACH) WIC APPROVED INFANT FRUITS AND VEGETABLES			VENDOR MUST DEPOSIT WITHIN 60 CALENDAR DAYS FROM FIRST DATE TO USE.		Payable Through FSNC 75-1248 AN AFFILIATE OF SECURITY STATE BANK 919 HOWARD LAKE, MN 55349 ACCT# 892970	
			FIRST DATE TO USE 04/13/2011			
			DATE OF USE 04/30/11			
			LAST DATE TO USE 05/12/2011			
			PAY TO THE ORDER OF:			
			ACTUAL \$ AMOUNT \$ CORRECTION ONLY CASHIER RETAIL \$ 15.84			
			TAX EXEMPT SALE NOT TO EXCEED \$200.00 NOT PAYABLE WITHOUT VENDOR ID STAMP			
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE						
SIGNATURE AT STORE: 						
CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.						

How to Use WIC Checks

- Shop only at WIC-approved stores.
- Use food checks only from the "first date to use" through the "last date to use" shown on the food checks.
- Buy only the foods and amounts listed on the food check.
- Show your WIC ID Folder or Arizona state-issued ID to the cashier before your items are rung up.
- Remember to sign in the white area of the check at the store.
- Make sure the total dollar amount on the check matches the receipt.
- Be courteous to the cashier.

Como Usar los Cheques de WIC

- Compre solo en las tiendas autorizadas por WIC.
- Usa los cheques de alimentos sólo desde la "primera fecha para usar" hasta la "última fecha para usar" que aparecen en los cheques de alimentos.
- Compre solo los alimentos y cantidades que indica el cheque de alimentos.
- Muestre su Tarjeta de Identificación o Identificación expedida por el Estado de Arizona, así como su cheque de WIC al cajero, antes de que marque los artículos.
- Recuerde firmar en el área blanca del cheque en la tienda.
- Asegúrese que la cantidad total en dólares del cheque coincide con la del recibo.
- Sea cortés con el cajero.


Signature of Authorized Representative
Firma del Representante Autorizado

1. 
2. **VOID**

If this ID Folder is for 150 North 18th Ave. Si encuentra esta ID como a Arizona D...
 WIC wants to hear from poor customer serv...
 What should you report? If you witness or have knowledge of any of the following...
 ¿Qué debe reportar? Si es testigo o sabe de alguno de estos casos, mal servicio al...
 * 800-2525-11 www.azwic.gov



Redemption Procedures

Correcting the signature

Two occasions when the signature can be re-signed:

1. If the signatures on the food instrument and WIC identification do not match

or

2. If the cashier is presented with a food instrument that already has a signature

During the WIC Transaction

To correct the signature

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT #	75-1248 Payable Through FSBC, AN AFFILIATE OF SECURITY STATE BANK 919 HOWARD LAKE, MN 55349 A0679-902070	
AGENCY	CLINIC	PARTICIPANT ID	PARTICIPANT NAME	DRAFT TYPE	2741221	AZ WIC USE ONLY	
07	01	1000008829	KELLY, KIM	001692AA	VOID		
36	OZ (UP TO 36 OZ) WIC APPROVED CEREAL (NOT INFANT)						
2	CONTAINER (12 OZ FROZEN) WIC APPROVED 100% JUICE				DATE OF USE		
		OR				ACTUAL \$ AMOUNT	
2	CONTAINER (46 OZ) WIC APPROVED 100% JUICE				\$ CORRECTION ONLY	CASHIER INITIAL	LAST DATE TO USE
1	GAL SKIM/NONFAT OR LOWFAT (1%) MILK (HALF GALLON OR GALLON CONTAINERS ONLY)						05/17/2005
1	HALF GAL SKIM/NONFAT OR LOWFAT (1%) MILK (HALF GALLON CONTAINERS ONLY)				PAY TO THE ORDER OF:		
						TAX EXEMPT SALE NOT TO EXCEED \$200.00	
						NOT PAYABLE WITHOUT VENDOR ID STAMP	
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE							
SIGNATURE AT STORE							
<i>Kim Kelly</i> Kim Kelly							
CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.							

← Inside the box

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT #	75-1248 Payable Through FSBC, AN AFFILIATE OF SECURITY STATE BANK 919 HOWARD LAKE, MN 55349 A0679-902070	
AGENCY	CLINIC	PARTICIPANT ID	PARTICIPANT NAME	DRAFT TYPE	2741223	AZ WIC USE ONLY	
07	01	1000008829	KELLY, KIM	000334AA	VOID		
2	CONTAINER (12 OZ FROZEN) WIC APPROVED 100% JUICE						
		OR				DATE OF USE	
2	CONTAINER (46 OZ) WIC APPROVED 100% JUICE				ACTUAL \$ AMOUNT	LAST DATE TO USE	05/17/2005
2	GAL SKIM/NONFAT OR LOWFAT (1%) MILK (HALF GALLON OR GALLON CONTAINERS ONLY)				\$ CORRECTION ONLY	CASHIER INITIAL	
1	LB (UP TO 16 OZ) WIC APPROVED CHEESE				PAY TO THE ORDER OF:		
1	DOZ FRESH EGGS (12 PACK CARTONS ONLY)				TAX EXEMPT SALE NOT TO EXCEED \$200.00		
						NOT PAYABLE WITHOUT VENDOR ID STAMP	
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE							
SIGNATURE AT STORE							
<i>Kim Kelly</i> Kim Kelly							
CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.							

To the left of the box.

→



“X” Signature Process

- At the clinic:
 - The participant, Authorized Representative or Proxy will place an “X” on the ID Folder (or Proxy Certification Form) signature line.
 - The WIC staff will verify the person’s mark by writing:
For (person’s name) by (employee’s signature)

“X” Signature Process

How to Use WIC Checks

- Shop only at WIC-approved stores.
- Use food checks only from the “first date to use” through the “last date to use” shown on the food checks.
- Buy only the foods and amounts listed on the food check.
- Show your WIC ID Folder or Arizona state-issued ID to the cashier before your items are rung up.
- Remember to sign in the white area of the check at the store.
- Make sure the total dollar amount on the check matches the receipt.
- Be courteous to the cashier.

Como Usar los Cheques de WIC

- Compre solo en las tiendas autorizadas por WIC.
- Use los cheques de alimentos sólo desde la “primera fecha para usar” hasta la “última fecha para usar” que aparecen en los cheques de alimentos.
- Compre solo los alimentos y cantidades que indica el cheque de alimentos.
- Muestre su Tarjeta de Identificación o Identificación expedida por el Estado de Arizona, así como su cheque de WIC al cajero, antes de que marque los artículos.
- Recuerde firmar en el área blanca del cheque en la tienda.
- Asegúrese que la cantidad total en dólares del cheque coincide con la del recibo.
- Sea cortés con el cajero.

 **Signature of Authorized Representative**
Firma del Representante Autorizado

1. Doctor Janet Carter By Wendy Jones

2. _____

If this ID Folder is found, return to the nearest WIC clinic or mail to the Arizona Department of Health Services, 150 North 18th Avenue, Suite 310, Phoenix, AZ 85007.
Si encuentra esta Carpeta de Identificación, por favor devuélvala a la clínica de WIC más cercana o envíela por correo a: Arizona Department of Health Services, 150 North 18th Avenue, Suite 310, Phoenix, AZ 85007.

WIC wants to hear from you! What should you report? If you witness or have knowledge of any of the following: poor customer service, criminal activity such as fraud, waste of funds, discrimination, employee misconduct, or conflict of interest. To report WIC fraud and abuse, call the Fraud Hotline at 1-866-229-6561 or visit www.azwic.gov.
¿Comuníquese con WIC! ¿Qué debe reportar? Si es testigo o sabe de alguno de estos casos: mal servicio al cliente, actividades ilegales como fraude, mal uso de fondos, discriminación, mala conducta de un empleado o conflicto de intereses. Para reportar fraude y abuso en WIC, llame a la Línea Directa de Fraude al: 1-866-229-6561 o visite: www.azwic.gov.

1-800-2525-WIC www.azwic.gov

Authorized Representative's "X"

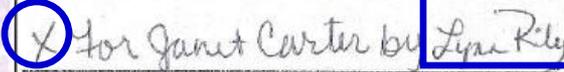
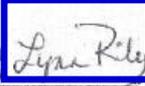
Clinic employee's signature

“X” Signature Process

- At the store:
 - The participant, Authorized Representative or Proxy will place an “X” in the food instrument signature box.
 - The cashier will verify the individual’s mark by writing:

For (person’s name) by (cashier’s signature)

“X” Signature Example

 ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon. - Fri. 8 AM - 5 PM, Call 1-800-2625-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # 38869876	75-1248 PAYABLE THROUGH SOLUTIONS, Citicorp Alliance Bank, Howard Lake Branch Citra City, MN 56222 ACCT# 802070 919
AGENCY 04	CLINIC 04	PARTICIPANT ID 4041051228	PARTICIPANT NAME WIC, CHILD	DRAFT TYPE 000311AA	VENDOR MUST DEPOSIT WITHIN 60 CALENDAR DAYS FROM FIRST DATE TO USE.	
3 CONTAINER (12 OZ FROZEN) WIC APPROVED 100% JUICE OR 3 CONTAINER (46 OZ) WIC APPROVED 100% JUICE 2 GAL FAT FREE / SKIM / NONFAT OR LOWFAT (1%) MILK (GALLON CONTAINERS ONLY) 1 LB (16 OZ EACH) WIC APPROVED CHEESE 1 DOZ FRESH EGGS (12 PACK CARTONS ONLY)					FIRST DATE TO USE 08/06/2013	DATE OF USE 8/20/2013
					ACTUAL \$ AMOUNT \$ CORRECTION ONLY CASHIER INITIAL	LAST DATE TO USE 09/04/2013
					\$ 29.85	PAY TO THE ORDER OF:
					TAX EXEMPT SALE NOT TO EXCEED \$200.00	NOT PAYABLE WITHOUT VENDOR ID STAMP
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE						
SIGNATURE AT STORE:						
						
CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.						

Authorized Representative's "X" →

Cashier's signature

NOTE: If this procedure is not followed, the food instrument will not be paid.

Exchange of WIC Foods

- No exchanges of foods purchased with a WIC food instrument for unauthorized food, non-WIC type foods or other items
- Exception: Exchanges of an identical authorized supplemental food item when the original authorized supplemental food item is defective, spoiled, or has exceeded its “sell by,” “best if used by” or other date limiting the sale or use of the food item.

Recalled Food Items

- Vendors are permitted to exchange the defective (recalled) food item for an identical food item. If the Vendor has removed all the identical food items from the shelves, the Vendor can exchange the recalled food item for another **authorized** food of the same type from the food list.
- For example: peanut butter for peanut butter, juice for juice, etc.

Participant Problems

Participant's responsibilities

- Properly redeem the WIC food instrument.
- Treat WIC staff and Vendors courteously.

Participant Problems

Participant problems can be reported by:

Phone: **1 (866) 229-6561**

Email: **azwiccomplaints@azdhs.gov**



Payment Process

Validate the food instruments by:

- Clearly stamping Vendor ID number on the food instruments.
- Make sure to use the correct Vendor stamp for the appropriate WIC Program.



Payment Process

Validate the food instrument:

- Arizona WIC food instruments must be deposited in the bank within 60 calendar days of the 'First Date to Use.'

Payment Process



- **Regular Vendors**: are paid an approved maximum for the food instrument type based on the Vendor's peer group
- **Above-50-Percent Vendors**: are paid the statewide average of all authorized Regular Vendors for the food instrument type

Why Food Instruments are Rejected for Payment



- Food instruments that reject for:
 - Missing Vendor ID Stamp - can be stamped and re-deposited into the bank one time only
 - Unreadable Vendor Stamp – may be re-stamped (on the back) and submitted for second level review

Why Food Instruments are Rejected for Payment



- Food instruments that reject for:
 - Altered
 - Over the Maximum
 - Stale dated (deposited over 60 days from “First Date of Use”)
 - Cashed Early or Late
 - Missing the Signature
- Will not be paid

Why Food Instruments are Rejected for Payment



- Food instruments that reject for:
 - Unreasonable \$ Amount
- Will be paid through the ACH Process for the maximum amount allowed for the food instrument type

How Does the ACH Process Work?



- Food instrument rejects
- Maximum amount is deposited in ACH account
- Transferred to Vendor account

How Does the ACH Process Work?



- Banking contractor will send a bank statement that includes:
 - Food instrument serial number and type
 - Redeemed amount requested and the maximum amount paid

Rejected Food Instruments



- Cost to the Vendor
 - The Vendor is charged a returned check fee
- Cost to the Program
 - WIC is charged a banking fee

Second Level Review

- Second chance for payment on a food instrument that rejected from the bank. A second level review must be requested in writing and:
 - Must contain the original food instrument or bank photocopy and
 - Be submitted within 90 calendar days from “First Date to Use”
- If authorized to pay, a replacement food instrument will be issued

Assessment of Claims

- When monitoring activities are conducted and an overcharge violation is found, the Arizona WIC Program may establish a claim in the amount of the full purchase price of each food instrument that contained the overcharge or other errors.
- The Vendor must pay any claim that is assessed by the Arizona Department of Health Services.

Assessment of Claims

- In collecting a claim, the WIC Program may offset the claim against current and subsequent amounts to be paid to the Vendor.
- The Vendor may also be sanctioned for overcharges or other errors in accordance with the WIC Program's sanction schedule.

Reporting Changes

- All changes to the Vendor's business **MUST** be reported to the Arizona WIC Program **not less than 30 calendar days prior** to the change.
- Changes in:
 - Ownership
 - Hours of business

Must be made in writing

Reporting Changes

- Changes to:
 - Bank accounts
 - Store name
 - Adding new outlets
 - Store information (i.e., phone numbers, mailing address, store contact)
- Can be made via the Vendor website:
<http://vendor.azwic.gov>

Vendor Monitoring

- The Arizona WIC Program monitors authorized Vendors
 - To ensure that Vendors understand program rules, regulations, policies and procedures

NOTE: Violations found during monitoring activities are subject to sanctions.

Vendor Monitoring Activities

(include, but are not limited to)

- Vendor Site Reviews
- Rejected Food Instrument Report Review
- Compliance Investigations

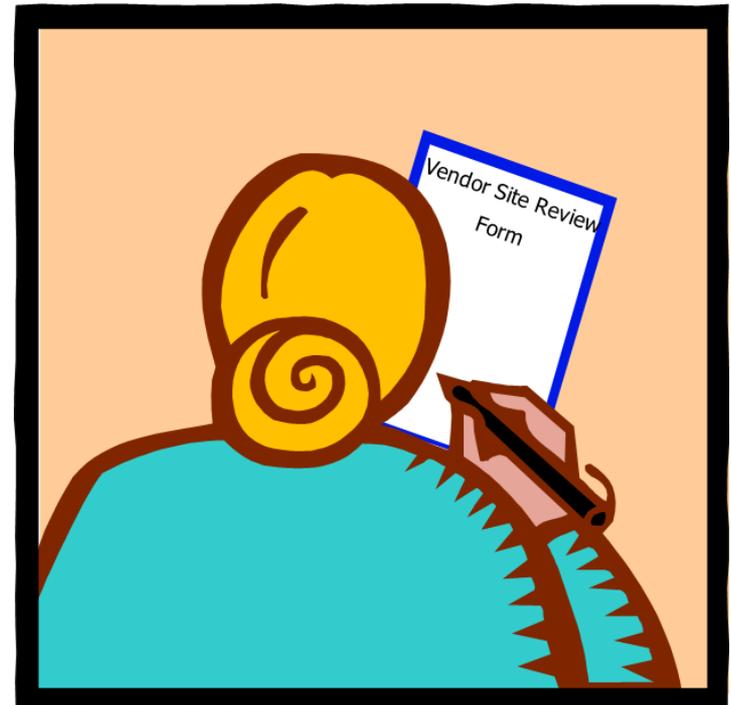
Vendor Monitoring Activities

(include, but are not limited to)

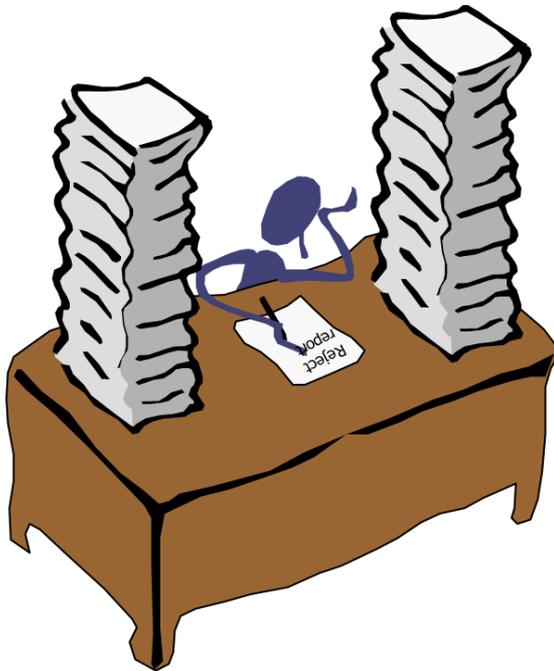
- Inventory Audits
- WIC participant/Authorized Representative and clinic complaints
- Criminal/civil background checks

Vendor Site Review

- Minimum stock and variety requirements
- Prices
- Expiration of food items
- Food instruments
- Sanitation
- Participant complaints



Rejected Food Instrument Report



- Problems found are addressed with individual Vendors
- Subject to sanctions

Compliance Investigations

- Covert (undercover) visit to the store
- Verify redemption procedures



- Check for unauthorized food sales
- Overcharging for WIC foods
- Treatment of WIC customers

Inventory Audits



- Compare the Vendor's invoices against the WIC redemptions.
- Problems found may result in assessment of claims and disqualification from program.

Participant Complaints

WIC participants can report complaints by:

Phone: **1 (866) 229-6561**

Email: **azwiccomplaints@azdhs.gov**



Consequences

Violations may result in the following:

- **Written Warnings** (Unless the Department, in its sole discretion, determines that a warning letter would compromise an investigation)
- **Administrative Fines**
- **Termination of Vendor Contract**
- **Disqualification from Program**
- **Civil Money Penalty**

Sanction Policy

- Department Sanctions
 - Remain on Vendor's record for 24 months from the date of the violation and may be used when determining how many incidents of that violation have occurred.

Mandatory Sanctions

Federal Regulations

- Mandatory Sanctions
 - One-year disqualification up to a permanent disqualification

Sanction Policy

- Disqualification from the Supplemental Nutrition Assistant Program (SNAP) results in a disqualification from the WIC Program
 - No written warning will be sent.
 - Automatic disqualification from the WIC Program, not subject to appeal under the WIC Program.
 - Same length of time
 - May start at a later date

Sanction Policy

- A disqualification from one WIC Program may result in disqualification from other WIC Programs.
- In cases where inadequate participant access occurs, a civil money penalty will be imposed.

Appeal Rights & Hearings



- Vendor has a right to appeal any adverse action that the Program takes against their store.
- Request a Fair Hearing in writing which may include a request for an informal settlement conference.

You're invited!

- Mandatory Vendor Training Annually
 - June: Register in May (notice in Monday email in May)
- Authorization Training Monthly
 - As needed (call to register)



QUESTIONS?

